

SOUTHWESTERN LAW SCHOOL

L O S A N G E L E S

Employee Tuition Remission Program Form

Subject to [Employee Tuition Remission Policy](#) limits, a non-faculty Southwestern Law School employee who has met all admission requirements of the J.D. program, been admitted for enrollment at Southwestern, and met all eligibility requirements listed in the Policy may enroll in the Employee Tuition Remission Program ("Program").

Instructions: To apply for the Program, the employee must complete this form and submit it to the Administrative Services Office at hr@swlaw.edu no later than March 15 of the year they intend to request tuition remission. Exceptions to this deadline should not be expected and will be made only upon approval by the President and Dean. The employee must complete Sections 1 and 2. The employee's current supervisor must complete Section 3.

Section 1: Eligibility

1. Have you been employed full-time at Southwestern for at least three consecutive years?
Yes ___ No ___
2. Please list your current job title and your department:
3. Please list the academic year for which you are seeking tuition remission (e.g. 2023-2024):
4. Are you currently enrolled as a student at Southwestern?
Yes ___ No ___
5. If not, did you submit an application for admission to Southwestern's J.D. program no later than February 1 before the academic year for which you are seeking tuition remissions?
Yes ___ No ___

6. If no, please explain:

7. Are you on academic or disciplinary probation?
Yes ___ No ___ Not applicable ___

Section 2: Certification

I verify that the information I am submitting to apply for the Program is complete and accurate to the best of my knowledge. I understand that any intentional misrepresentation contained in this request may result in disciplinary action. I also understand that I may not receive tuition remission due to Employee Tuition Remission Policy limits or because Southwestern determines that I do not meet the eligibility requirements. I confirm that I have read the Employee Tuition Remission Policy and understand that I may be unenrolled from Program if I fail to meet the requirements for continued enrollment in the Program. I also understand that Southwestern expressly reserves the right to change, modify, or cancel any aspect of the Employee Tuition Remission Policy at any time, with or without prior notice.

Employee Signature: _____

Date: _____

Section 3: Supervisor Certification

Instructions: Supervisor must insert their initials on responses to the questions below:

8. Is the employee in good standing?
Yes ___ No ___

9. If you answered "no" to Question 8, please explain:

10. During the past year, has the employee's work performance been satisfactory?

Yes ___ No ___

11. If you answered "no" to Question 10, please explain:

12. Will the employee be able to continue working in your department while attending Southwestern's evening program without burdening other employees within the department or core departmental activities?

Yes ___ No ___

13. If you answered "no" to Question 12, please explain:

14. Did the employee receive a satisfactory (or better) annual review during the most recent performance appraisal?

Yes ___ No ___

15. If you answered "no" to Question 14, please explain:

Supervisor Signature: _____

Date: _____